PART I – SDFS 2006-2007 APPLICATION CHECKLIST
SDFS PROGRAM – "PRINCIPLES OF EFFECTIVENESS" must be applied

Application Materials Needed	2006-2007 – APPLICATION REPORT – Deadline June 16, 2006 *(Complete both State and Federal – complete only the **SHADED COLUMNS** indicating programs, services and grade level.)*
Cover Sheet	**Complete ALL of Cover Sheet** ❑ **Include all updated current information pertaining to SDFS Coordinator and/or Contact Person** ❑ Signature of Superintendent – 2006-2007 Grant Application cover page bottom **left-hand side only.**
Assurances	❑ Assurances – Superintendents signature and date on bottom of page ❑ Research Based Program Assurance <u>Waiver</u> signed and dated by superintendent and SDFS Coordinator
Advisory Board Private/Charter Schools	❑ Advisory (Board) Council (Names of Members and Affiliations – **Parent is required**) ❑ Private/Charter Schools – List schools plus copy of letter of notification (Asterisk those who have elected to participate) Sample letter is included in application. Letter must be sent annually by certified mail to all private schools and **charter schools not funded directly by SDFS** in the district.
14 Drug Testing	❑ Fill out top of page – make sure to list contact person in charge of Drug Testing Program ❑ **If No**, please check and submit form with Application ❑ **If Yes**, complete shaded columns only to bottom of page (Evaluation) and submit form with Application
Principles of Effectiveness **Goals and Objectives**	❑ **Review Guidelines – "Principles of Effectiveness** ❑ Goal(s) based on needs assessments make sure and state what assessment(s) was used. ❑ Complete all shaded columns (Columns 1-5 only) Do not complete Column 6 ❑ Sections/Categories/Programs listed must be stated in the Program Inventory and Budgets
CRW Requirements	❑ If participating, please read Community Resource Workers (CWR) Requirements page ❑ If participating in CRW, complete goal and objective page for District **Community Resource Workers**
NEW – Required Information **Online SDFS Program Inventory (Use SDFS Coord. Password)**	❑ **The following new Directions/Listings and Forms are all on line. Use SDFS Coordinator Password.** ❑ Please read completely the **NEW** "SDFS Program Inventory Information/Directions" page ❑ Review **NEW "***SDFS Program Inventory Listing***"** for program categorizing ❑ On website follow directions on Program Inventory and Budget Form Page ❑ If your program is a Research-Based Program and not shown on the Idaho Researched Based Effective Programs Being Implemented listing, complete "Proven Research Based Form" so that it can be added for next year. Must give name of Proven list or listings where found. ❑ Complete the Section/Categories/Programs of your comprehensive SDFS program. Save each Section until all SDFS program Sections funded or non-funded this year are entered ❑ Print copies of all pages in **Landscape** to submit with 2006-07 SDFS Application
BUDGET FORMS 1-13 **Online process, complete and make hard copy in Landscape**	❑ Forms 1-13 -- **Required Information** will be able to do on-line, use coordinator password, complete as directed by onsite directions from Inventory page, save & make a copy in Landscape of each Section and attached to application. ❑ Complete **shaded columns only**, description, grade level and budgeted amount, etc. ❑ **Staff - Attach statement of job description and responsibilities for each staff member listed that is funded by SDFS funds** ❑ Form 13 – Automatically totaled for Sections 1-11. Totals should match Section totals and the overall Budgeted Total should be the same as Allocation amount located in upper right-hand corner. ❑ **Make Landscape copy of all Budget Pages 1-13 and submit with Application**

Submit all of the above items with your Application

Please make copy of the entire completed Application for your files prior to submitting to SDFS Office

District SAP Tracking Forms 16, 16A, 16B, and 16C, are Forms that need to be submitted as part of your evaluation packet.

16D is the Community Resource Worker Referral Evaluation Tracking Form

17A, 17B and 17C are SAP Student Surveys that need to be **distributed at the beginning of the school year** to the responsible person in each building. *These are for the referred students to complete at the end of a session*.

Incident Tracking Forms #18-21A need to be distributed at the beginning of the school year to the responsible person in each building. Tracking will need to be done throughout the year. A number of tracking programs may be used as long as all the incidents found on the hard copy are being tracked. A SDFS web-based program is available on the Department's web site and can be used throughout the year.

At the end of the school year, each building will have to input their data into this web-based program. This will be the only way to submit SDFS incident tracking data for the 2005-06 year-end evaluation requirements. Each building principal will use their **accreditation password** to access the data website and each SDFS coordinator will also received a **password**, but only to view data. Directions will follow and will be posted on the website at the beginning of the school year.

WEB BASED INCIDENT TRACKING FORMS: #18 - 21-B

At the end of the school year, each building will have to input their data into the web-based program. This will be the only way to submit SDFS incident tracing data for the 2005-06 year-end evaluation requirements.

Login
1. On the Internet, go to the Idaho State Department of Education's Safe and Drug Free Schools web-based incident tracking system at **http://www.sde.state.id.us/Safe/SDFSTracking/**

2. Click on the appropriate application link. The **Login Screen** appears. Select **District** and then **School** from the list, and then enter the assigned **Password** (*principal's school accreditation password*)

3. SDFS Coordinators will have a unique password to only view the data.

4. A blank copy of the Tracking Forms can be downloaded from the Login page along with instructions for completion

5. *For technical problems or password needs, contact the Webmaster at webmaster@sde.state.id.us*

6. *For all other questions or needs, contact njplante@sde.idaho.gov*

Deadline for Final Submit is the third Friday of June.

After successfully submitting the incident forms using the "Final Submit" link, the School needs to download and send the **Signed Assurance Page** to the district Safe and Drug-Free Schools coordinator.

All schools' signed assurance pages must be included in the program **evaluation** packet that is mailed into the state SDFS office. **Approval** of the 2006-07 Application cannot be made until this is completed.

IDAHO DEPARTMENT OF EDUCATION
Safe and Drug-Free Schools
2006-2007 State and Federal Grant Application/Evaluation

(Please staple this cover sheet to your Application before mailing)

Please complete all requested information

SDFS Coordinator: _____

District & Number: _____

Address: _____

City: _____ State: **ID** Zip: _____

School Phone #: _____ School Fax #: _____

School Email Address: _____

Summer Phone #: _____ Summer Email Address: _____

	Summer SDFS Contact Info	*New SDFS Coordinator Info for 2006-07*
Contact Person		
School Phone Number Home/Work Phone Number		
School Fax Number Home/Work Fax Number		
Summer *e-mail address (if any)*		

This application is for: (Please check)   **State Allocation:** $ _____

_____ Federal Title IV Funds   **Federal Allocation:** $ _____
Funding is dependent on receipt of final federal appropriation

_____ State Tobacco Funds

_____ Do not wish to apply for funds.

_____   _____
Superintendent Signature *(Application)*   Superintendent Signature *(Evaluation)*

Date_____   Date_____

DEADLINE: June 16, 2006
Mail completed document to:
Claudia Hasselquist, Coordinator   P. O. Box 83720
Safe and Drug-Free Schools   Boise ID 83720-0027
State Department of Education   Phone: 208-332-6960
Fax: 208-334-2229
http://www.sde.state.id.us/Safe/Grants

TITLE IV SAFE AND DRUG-FREE SCHOOLS AND COMMUNITIES ASSURANCE PAGE

THE APPLYING SCHOOL DISTRICT HEREBY ASSURES THAT:

1.   This application was developed "through timely and meaningful consultation with state and local government representatives, representatives of schools to be served (including private schools), teachers and other staff, parents, students, community-based organizations, and others with relevant and demonstrated expertise in drug and violence prevention activities (such as medical, mental health, and law enforcement professionals.)";

2.   **"On an ongoing basis, the local educational agency (LEA) shall consult with such representatives and organizations in order to seek advice regarding how best to coordinate such agency's activities under this subpart with other related strategies, programs, and activities being conducted in the community";**

3.   At the initial stages of design and development of a program or activity, the LEA shall consult with appropriate entities and persons on issues regarding the design and development of the program or activity, including efforts to meet the principles of effectiveness described in section 4115 (a), NCLB;

Activities or programs to be funded comply with the principles of effectiveness (described in section 4115(a)) and foster a safe and drug-free learning environment that supports academic achievement;

4.   **The local education agency (LEA) provides age appropriate, comprehensive drug and violence prevention education in each grade level served (from early childhood through grade 12);**

5.   The LEA program is designed "for all students and employees, to --

(A)   prevent the use, possession, and distribution of tobacco, alcohol, and illegal drugs by students and to prevent the illegal use, possession, and distribution of such substances by employees;

(B)   prevent violence and promote school safety; and recognize and resist pressures to experiment that influence such children to use controlled substances or alcohol; and

(C)   create a disciplined environment conducive to learning."

6.   The LEA program will include activities to promote the involvement of parents, and coordination with community groups and agencies, including the distribution of information about the local educational agency's needs, goals, and programs ;

7.   Any materials produced or distributed with funds made available under this grant shall reflect the clear and consistent message that acts of violence and the illegal use of drugs are wrong and harmful.

8.   The applicant will provide training for teachers and other personnel involved in the implementation of programs.

9.   The application and any waiver request under section 4115(a)(3) will be available for public review after submission of the application;

10.   Funds under this Act will be used to **supplement** and, to the extent practical, increase the level of state and local funds available for alcohol and drug abuse education, and in no case **supplant** such funds.

11.   The applicant has (or the schools to be served have) a plan for keeping schools safe and drug-free that includes –

(A)   appropriate and effective school discipline policies that prohibit disorderly conduct, the illegal possession of weapons, and the illegal use, possession, distribution, and sale of tobacco, alcohol and other drugs by students;

(B)   security procedures at school and while students are on the way to and from school;

(C)   prevention activities that are designed to create and maintain safe, disciplined, and drug-free environments;

(D)   a crisis management plan for responding to violent or traumatic incidents on school grounds; and

(E)   a code of conduct policy for all students that clearly states the responsibilities of students, teachers, and administrators in maintaining a classroom environment that addresses the issues outlined in Title IV, Section 4114 (E)(1)through (V);

12.   The applicant will comply with all provisions of Title IV (Safe and Drug-Free Schools and Communities) of No Child Left Behind of 2001, and applicable regulations, policies and administrative guidelines;

13.   The applicant agrees to keep such records and provide such information to the Department of Education as reasonably may be required for fiscal audit and program evaluation purposes.

14.   Public and non-public school personnel and community members have equal opportunity to participate in approved programs as provided by the Law.

15.   All requirements for both Department of H&W Children and Family Services, and Department of Education, SDFS Program will be meant for funding of Community Resource Workers (CRW) to be provided.

These Assurances reflect current statute (required by Title IV, Safe and Drug-Free Schools and Communities, within Improving America's Schools Act of 1994 (P.L. 103-382)). Should statute changes occur, further assurances may be required.

_____   _____

Signature of authorized representative designated by LEA Board of Education   Date

ASSURANCE WAIVER: USE OF RESEARCH-BASED PROGRAMS
TITLE IV, PART A: SAFE AND DRUG-FREE SCHOOLS AND COMMUNITIES
2006-2007 School Year
Idaho Prevention Programs Implement Risk And Protective Factor As Strategies
For Meeting The Research-Based Requirement.

_____
District Name and Number

_____   _____
SDFS District Coordinator   Date

SCIENTIFIC RESEARCH-BASED RISK AND PROTECTIVE FACTORS

Source: National Institute on Drug Abuse. <u>Preventing Drug Use Among Children and Adolescents: A Research-Based Guide for the Community (1997</u>)

In more than 20 years of drug abuse research, the National Institute on Drug Abuse (NIDA) has identified important principles for prevention programs in the family, school, and community. Prevention programs often are designed to enhance "protective factor" and to reduce "risk factors." Protective factors are those associated with reduced potential for drug use. Risk factors are those that make drug use more likely. Research has shown that many of the same factors apply to other behaviors such as youth violence, delinquency, school dropout, risky sexual behaviors, and teen pregnancy.

Idaho school district prevention programs are designed to enhance "protective factors" and move toward reversing or reducing known "risk factors."

- Protective factors include strong and positive bonds within a pro-social family; parental monitoring; clear rules of conduct that are consistently enforced within the family; involvement of parents in the live of their children; success in school performance; strong bonds with other pro-social institutions such as school and religious organizations; and adoption of conventional norms about drug use.
- Risk factors include chaotic home environments, particularly in which parents abuse substances or suffer from mental illnesses; ineffective parenting especially with children with difficult temperaments or conduct disorders; lack of mutual attachments and nurturing; inappropriately shy or aggressive behavior in the classroom; failure in school performance; poor social coping skills; affiliations with deviant peers or peers displaying deviant behaviors; and perceptions of approval of drug-using behavior in family, work, school, peer, and community environments.

If programs are proven <u>non effective</u> in meeting the Goals/Objectives within two years, programs will be re-evaluated and adjustments will be made.

_____   Date_____
Superintendent

ADVISORY COUNCIL MEMBERSHIP
Safe and Drug-Free Schools
(Section 4114.Local Application – HR 1-318)

A local advisory council **must be established**, *with mandatory parent representation,* and membership should include to the greatest extent possible, individuals such as teachers, students, representatives of state and local governments, business persons, medical professionals, law enforcement, community-based organizations, and other groups with interest and expertise in the field of drug abuse education and prevention.

The role of the local advisory council includes assisting the LEA in developing its application for SDFSC Act funds, disseminating information about the drug and violence prevention programs and activities conducted by the LEA, advising the LEA on coordination of program efforts with relevant agencies, reviewing program evaluation material and information, and making recommendations for improving the local drug and violence prevention program.

NAME	AGENCY/GROUP REPRESENTED

EVALUATION REPORT *(End of year only)* *Please list the dates that the Advisory Board met and attach the Minutes of each meeting.)*	
Dates of Meetings	*Minutes Included (please check)*

Private Schools

Please furnish a listing of all private schools located in your LEA with an asterisk beside the name of those who have elected to participate in the Safe and Drug-Free Schools and Community Act Program. (Please refer to the copy of the "*Idaho Educational Directory*")

The Education Department General Administrative Regulations (EDGAR), Section 76-656, requires:

Please address all of the below requirements on Budget Form 7.B in your grant application entitled, "Services to Children in Private Schools."

A.   A description of how the applicant will meet the federal requirements for participation of students enrolled in private schools.

B.   The number of students enrolled in private schools who have been identified as eligible for benefits under the program.

C.   The number of students enrolled in private schools who will require benefits under the program.

D.   The basis the applicant used to select the students.

E.   The manner and extent to which the applicant complied with the consultation requirements listed in Section 76.652 of EDGAR.

F.   The places and times that the students will receive benefits under the program.

G.   The differences, if any, between the program benefits the applicant will provide to public and private school students and the reasons for the differences.

> - **Application/Evaluation Document Retention**
> - **In the event that the private school(s) elects not to participate:**
> - **Please provide a copy of documentation that the LEA has made them aware of their eligibility to receive services under the Act and their response.**
> - **Letter must be sent annually by certified mail to each private school.**
> - **Remember to retain a copy of these letters and receipts on file for audit purposes**

SDFS SAMPLE LETTER to private schools and charter schools not funded by SDFS.

Date

-Contact Name-
-School Name-
-Street Address-
-City, State, Zip-

Dear

This letter is to advise you that, in accordance with Title IV – 21st Century Schools, part A – Safe and Drug-Free Schools and Communities, Subpart I, your school is <u>eligible</u> to participate in prevention program services offered in public schools that are provided by the Safe and Drug-Free Schools and Communities Act funded by the Title IV federal program.

Please indicate if you are interested in participating in   Yes   No
the district's Safe and Drug-Free Schools Program.   ____   ____

Fall Enrollment 2005-06 _____

Please submit back to this office by _____.

If you have any questions, please contact _____
                         Phone: _____
                         Email: _____

Sincerely,

NOTE: *Letter needs to be sent annually by certified mail to each private/charter school.*

TRACKING FORM #14   IDAHO SCHOOL DISTRICT DRUG TESTING
School Year 2006-2007
       http://www.sde.state.id.us/Safe/Grants/

 SCHOOL DISTRICT _____**#**_____

CONTACT PERSON _____**Ph** _____.

_____**NO District Drug Testing of *<u>any kind</u> is being used at this time** (submit form with SDFS Application /Evaluation).
   ❖ If District Drug Testing, please check YES in all areas that apply to your district's policy.
   ❖ Submit district policies covering areas indicated along with Drug Testing Form with the SDFS

*TYPE OF STUDENT DRUG TEST *(May test in more than one area, please mark accordingly)*	**YES**		**PARTICIPATING GRADES**	**YES**
Voluntary test at Parent Request			All Grades, K-12	
			Grades K - 6	
All students, randomly			Grades 7-9	
All interscholastic athletes, mandatory/random			Grades 9-12	
All interscholastic athletes, voluntary			Grades 10-12	
All extra-curricular activities, mandatory/random			Alternative School 7-9	
All extra-curricular activities, voluntary			Alternative School 10-12	
IDFY Members – extra-curricular activities				
			TESTS ADMINISTERED BY	
CONSENT FORM HAS TO BE SIGNED BY			Principals	
Student			Nurse	
Parent/Guardian			Non-school personnel/SRO	
Must be Notarized			Other school personnel	
TESTS FUNDED BY				
If Safe & Drug Free School Grant			**TEST EVALUATION BY**	
(*Please show Number tested &*			*(please name location)*	
number positive in section below)				
Parent/Student			District On Site Testing	
School General Fund			Local Lab	
Other (please specify)			In State Lab	
			State Forensic Lab	
			Out of State Lab	

         Application/Evaluation.

TEACHER/ADMINISTRATION DRUG TESTING *(do not include bus drivers)*	**Voluntary**	**Mandatory**
Administrators		
Teachers		
Support Staff		

EVALUATION	**2006-2007**	**COST FOR TESTS**	**2006-2007**
NO. OF STUDENTS TESTED	**#**	Cost Per Kit	**$**
NO. OF POSITIVE TESTS	**#**	**Total Year Actual Expenses for Drug Testing** *(kits, lab, administering, etc.)*	**$**

Please complete number of students tested including IDFY, Reasonable Suspicion and Parent Request if available!
ANOTHER REMINDER: *IF YOU STARTED DRUG TESTING IN 2006-2007,* **PLEASE SEND THE SCHOOL DISTRICT DRUG TESTING POLICIES!**

Goals and Objectives

SDFS Comprehensive Program Development
Based On Principles of Effectiveness Guidelines

The district K-12 SDFS program needs to be comprehensive covering tobacco, alcohol, other drugs and violence prevention. Program accountability must follow the required Principles of Effectiveness listed below:

1) Based on an assessment of objective data about the drug and violence problems in the schools and communities that are served.
2) Based on performance measures aimed at ensuring that these schools and communities have a safe, orderly, and drug-free learning environment.
3) Grounded in scientifically-based research that provides the program to be used will reduce violence and illegal drug use.
4) Based on analysis of prevalence of "risk factors, protective factors, buffers, assets, or other variables," identified through scientifically-based research that exists in the schools and communities in the State.
5) Include consultation with and input from parents. (Parent on SDFS Advisory Board)
6) Evaluated periodically against locally selected performance measures, and modified over time (based on the evaluation) to refine, improve, and strengthen the program.
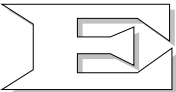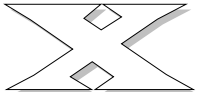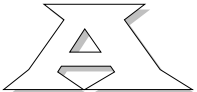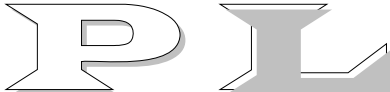
If implementing the CRW Community Program, review requirements, then complete program goals and objectives on designated CRW Goal/Objective Form.

Thank you for all your time and efforts in completing this very important inventory.

2006 – 2007 STATE TOBACCO APPLICATION   School District _____

Program Goal: (a specific and measurable statement of desired long-term, global impact of prevention activities)
All students will be educated in learning environments that are safe, drug-free, and conducive to learning.

1.	2.	3.	4.	5.	6.
Objectives (statement of precise and measurable results)	**Performance Indicators** (Desired Outcomes indicators of results, compared to identified baseline**)**	**Baseline Number Rate** (Starting point)	**Baseline Data Source** (Example: yearend incident report. SDFS Survey Referral to offer Pre/Post tests)	**List Curriculum, Program Activities and Services** (These must be shown on your SDFS Inventory Sheets) Please list staffing if SDFS funding is being used	**Year – End Performance Indicators (**Outcomes) (State specific measurable changes in behavior, knowledge, and attitude that the activities produced. Use data whenever possible)
1. To provide appropriate violence prevention information and programs to all K-12 student to reduce the number of fights	a. 1. To lower number of fights:by10 b. Middle Sch 15 c. High School 8	1. Fights a. 52 incidents b. 64 incidents c. 40 incidents	1. Referral to office Yearly Incident Report	Activities – Health Education 1.a. Conflict Resolution 1.b. Second Step 1.c. Plan A, Safe Strategy Program (PASS)	1. Number of fights reduced to a. 40 incidents decrease of 12 b. 48 incidents decrease of 17 c. 34 incidents decrease of 6 **FILL IN THIS COLUMN FOR YEAR-END EVALUATION**

❖ **All budgeted items must be identified in the Program Goal-Objective portion of the Application, and on the individual budget sheets.**

Program Goal:

1.	2.	3.	4.	5.	6.
Objectives (statement of precise and measurable results)	**Performance Indicators** (Desired Outcomes indicators of results, compared to identified baseline**)**	**Baseline Number Rate** (Starting point)	**Baseline Data Source** (Example: yearend incident report. SDFS Survey Referral to offer Pre/Post tests)	**List Curriculum, Program Activities and Services** (These must be shown on your SDFS Inventory Sheets) Please list staffing if SDFS funding is being used	**Year – End Performance Indicators (**Outcomes) (State specific measurable changes in behavior, knowledge, and attitude, that the activities produced. Use data whenever possible.:

❖ **All budgeted items must be identified in the Program Goal-Objective portion of the Application, plus recorded amounts on the individual budget sheet.**   http://www.sde.state.id.us/Safe/Grants/

2006 – 2007 STATE TOBACCO APPLICATION   School District _____

Program Goal:					
1.	**2.**	**3.**	**4.**	**5.**	**6.**
Objectives (statement of precise and measurable results)	**Performance Indicators** (Desired Outcomes indicators of results, compared to identified baseline**)**	**Baseline Number Rate** (Starting point)	**Baseline Data Source** (Example: yearend incident report. SDFS Survey Referral to offer Pre/Post tests)	**List Curriculum, Program Activities and Services** (These must be shown on your SDFS Inventory Sheets) Please list staffing if SDFS funding is being used	**Year – End Performance Indicators (**Outcomes) (State specific measurable changes in behavior, knowledge, and attitude, that the activities produced. Use data whenever possible.)

- ❖ **All budgeted items must be identified in the Program Goal-Objective portion of the Application, plus recorded amounts on the individual budget sheet.**
   http://www.sde.state.id.us/Safe/Grants/

2006 – 2007 STATE TOBACCO APPLICATION   School District _____

Program Goal:					
1.	**2.**	**3.**	**4.**	**5.**	**6.**
Objectives (statement of precise and measurable results)	**Performance Indicators** (Desired Outcomes indicators of results, compared to identified baseline**)**	**Baseline Number Rate** (Starting point)	**Baseline Data Source** (Example: yearend incident report. SDFS Survey Referral to offer Pre/Post tests)	**List Curriculum, Program Activities and Services** (These must be shown on your SDFS Inventory Sheets) Please list staffing if SDFS funding is being used	**Year – End Performance Indicators (**Outcomes) (State specific measurable changes in behavior, knowledge, and attitude, that the activities produced. Use data whenever possible.)

❖ **All budgeted items must be identified in the Program Goal-Objective portion of the Application, plus recorded amounts on the individual budget sheet.**

http://www.sde.state.id.us/Safe/Grants/

Safe and Drug-Free Schools Program

Community Resource Workers (CWR) Requirements

This is an information sheet to help explain about the Public Schools Appropriation Bill 1224 – 2005 concerning the Safe and Drug-Free Schools Program. The intent language states "funds shall be used either to fund Idaho Safe and Drug-Free Schools Program or to defray the cost of community resource workers, or both, at the discretion of the school district board of trustees."

This program's resources are to be expended on families with children age 3 years to grade 6. No more than ten percent of the school(s) accepted referrals may be for families with children older than grade 6.

A contract between the Department of Health and Welfare, Children and Family Services, i.e. Emergency Assistance to Families, EA. and the school district (contractor) is required.

Contract sample:
METHOD OF MONITORING:

     I. The **District** must provide:
- a) written job description
- b) copy of district/employee contract
- c) district mileage policy
- d) employee educational and licensure credentials
- e) document that the employee successfully completed fingerprinting and criminal history check
- f) work space including an area suitable to meet family members and make phone calls in a confidential manner
- e) salary worksheet indicating number of days to be paid, total cost of wages and benefits

     Items listed in **METHOD OF MONITORING**,

     II.   The **District** must provide:
- a) data sheet for each referral
- b) signed Emergency Assistance (EA) application indicating family income
- c) indication of age or grade level of child on the data sheet
- d) indication of the primary care giver on the data sheet
- e) closure sheet at completion of services to EA financial and non-financial cases

     III.   The **District** will develop and provide a written screening policy or protocol which is consistent with the data sheets submitted monthly on families accepted for referral.

     IV.   Review is conducted at monthly consultation meeting and through submission of data sheets, EA applications and service plans which meet standards.

Workload standards for a full-time social worker are 10-14 cases at any one time with approximately 50% of time spent in direct client contact.

The goal for Safe and Drug-Free schools Program is to provide a comprehensive approach for prevention serving all students.

Program Goal for District Community Resource Worker (CRW):						
1.	**2.**	**3.**	**4.**	**5.**	**6.**
Objectives (statement of precise and measurable results)	**Performance Indicators** (Desired Outcomes indicators of results, compared to identified baseline**)**	**Baseline Number Rate** (Starting point)	**Baseline Data Source** (Example: yearend incident report. SDFS Survey Referral to offer Pre/Post tests)	**List Curriculum, Program Activities and Services** (These must be shown on your SDFS Inventory Sheets) Please list staffing if SDFS funding is being used	**Year – End Performance Indicators (**Outcomes) (State specific measurable changes in behavior, knowledge, and attitude, that the activities produced. Use data whenever possible.:

❖ **All budgeted items must be identified in the Program Goal-Objective portion of the Application, plus recorded amounts on the individual budget sheet.**

http://www.sde.state.id.us/Safe/Grants